PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

ere as for

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	form should be used correspondence including d below or directed of tions.	for transmitting the ISSI ng the Patent, advance of herwise in Block 1, by (5 should be completed who ent correspondence address eparate "FEE ADDRESS" f
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, muchave its own certificate of mailing or transmission.		
2611 7590 053/14009 STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C. 1100 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005				I hereby certificate of Mailing or Transmission I hereby certifiyat his Fec(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name
			<u> </u>			(Signature
						(Date
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO.
10/572,413	10/572,413 03/16/2006		Jason Daniel Harold O'Connor		2496.0010000 2506	
TITLE OF INVENTION:	SELF-REGULATING	ELECTRICAL HEATIN	NG CABLE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOTAL FEE(S) D	UE DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	08/14/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	1		
FUQUA, SHAWNTINA T		3742	219-549000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53s). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, compared to the patent attorneys or agents of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name with per printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTIE: Ulnoss an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.1. Completion of this form is NOTI a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Heatsafe Cable Systems Limited United Kingdom						
Please check the appropria	ate assignee category or	categories (will not be pr	inted on the patent) :	Individual 🛭 Co	rporation or other private	group entity Governmen
⊠ Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies3			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby substorized to charge the required fie(s), any deficiency, or credit any overpayment, to Deposit Account Number (12–036—(enclose an extra copy of this form).			
 Change in Entity State a. Applicant claims 			D b. Applicant is no lon	ger claiming SMAL	L ENTITY status. Sec 37	CFR 1.27(g)(2).
			from anyone other than t Office.	he applicant; a regis	tered attorney or agent; or	the assignce or other party in
Authorized Signature	Dwardf	tashystone		Date 6	18/09	
Typed or printed name					33,876	
This collection of informa an application. Confidentia submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 2231:	tion is required by 37 Cl ality is governed by 35 application form to the ns for reducing this bur- rginia 22313-1450. DO 3-1450.	FR 1.311. The informatio U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	n is required to obtain or 1.14. This collection is est depending upon the indiversity Chief Information Office COMPLETED FORMS TO	retain a benefit by the imated to take 12 m ridual case. Any corest, U.S. Patent and To THIS ADDRESS.	to public which is to file (a ninutes to complete, includenments on the amount of Frademark Office, U.S. Do. SEND TO: Commissione	ind by the USPTO to process ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. or for Patents, P.O. Box 1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.